

Healthy Families Virginia: A State Initiative That Contributes to the Prevention of Violence

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Overwhelming evidence confirms that violence and many other bad outcomes are not inevitable. I will briefly review the statistics on the growing epidemic of child abuse and neglect, describe the relationship between child abuse and neglect and later criminality, and summarize the effect of Healthy Families Virginia, a state initiative to prevent child abuse and neglect and promote child development. We can intervene in the lives of children and their families to reduce both child abuse and neglect and later adolescent and adult criminal behavior.

The Epidemic Of Child Abuse And Neglect

A recent study released by the U.S. Department of Health and Human Services reported that the number of children abused and neglected rose from 1.42 million in 1986 to 2.81 million in 1993, an increase of 92% (U.S. Department of Health and Human Services, Children's Bureau, 1996). Children seriously injured from abuse nearly quadrupled during that time period. In Virginia this trend is continuing- from 1993 to 1997 reports of child abuse and neglect grew by eight percent and confirmed cases increased 4 percent (PCA Virginia, 1999). As troubling as these statistics are, they underestimate the problem for America's most disadvantaged families. The 1997 report by the Federal Interagency Forum on Child and Family Statistics reported that rates for the poorest families were 22 times higher than rates for families with incomes over \$30,000 and these are the families frequently enrolled in Healthy Families Virginia.

The Relationship Between the Prevention of Child Abuse and Neglect and other Major Social Problems

The relationship between child abuse and neglect and many other costly social problems has been bolstered by findings from longitudinal studies documenting that children who are abused or neglected are at higher risk for mental illness, alcohol and substance abuse, school failure, violence and criminal behavior, and serious physical illness.

Criminality: In Virginia and across the country, victims of child abuse are more likely to engage in criminality later in life. Over two-thirds (68%) of youths arrested have a prior history of abuse and neglect. According to a 1992 study sponsored by the National Institute of Justice (NIJ) maltreatment in childhood increases the likelihood of arrest as a juvenile by 53%, as an adult by 38%, and for violent crime by 38% (Widom, 1992). Abused and neglected girls fare worse: girls who were abused and neglected in childhood are 77% more likely to be arrested as juveniles. Early childhood sexual and physical abuse increased the risk of becoming a runaway and, for males, increased arrests for

violent sex crimes, such as rape and sodomy (Widom & Ames, 1994). Furthermore, a report by the National Council on Crime Abuse and Delinquency (1990), reported that youths with histories of severe abuse and neglect are much more likely to become chronic and serious juvenile offenders. The report recommends that the federal government explore conducting home visits for children born in high risk pregnancies.

Reduced Criminality Through Home Visiting: In the book *Investing in Our Children: What we know and don't know and don't know about the costs and benefits of early childhood interventions*, by the Rand Corporation, the authors documented the economic benefits from reduced crime realized through early intervention programs. Among the programs cited was the Nurse Home Visitation Program in Elmira, New York (a program similar to Healthy Families Virginia). The 15 year longitudinal follow up of the Elmira participants not only revealed 79% fewer verified cases of child abuse and neglect, but also less criminal activity. There were 69% fewer maternal arrests, 60% fewer instances of running away, 56% fewer arrests, and 56% less alcohol consumption when children were 15 years old. The Oregon Healthy Start Program (a program identical to Healthy Families Virginia) estimated cost savings that resulted from participation in this early intervention program (Helmick, 2000). The benefits included reduced arrests and associated costs among youths age 12 to 15, reduced criminal justice costs from averted criminal acts in adult years, and reductions in estimated monetary crime victim costs. The cost savings were nearly \$3000 per program participant. Although the focus of this testimony is on reduced criminal activity, the largest cost benefits of home visiting described in the Oregon analysis were actually associated with the monetary benefits of enhanced school readiness and educational attainment and the immediate monetary benefits realized through the reduction and maltreatment of children (e.g. less money for investigations, foster care, juvenile services, special education, etc.)

Healthy Families Virginia

HFV is a home visiting program similar in design and intensity to the Oregon and Elmira programs and is part of the national Healthy Families America initiative. HFV began in 1994 - today there are 30 programs serving more than 78 communities. Last year 3000 families were enrolled. The program begins with a comprehensive assessment and families with characteristics that place them at higher risk for poor child and family outcomes are offered longer-term home visitation that may extend through the early childhood years. The home visitors provide intensive parent education and support and referral to needed resources, such as health care, counseling, and housing. In Virginia, the model requires collaboration from multiple community agencies and organizations to create a network of services that can support families and experts in violence prevention agree that a comprehensive approach is necessary to prevent violence. The Hampton Healthy Start Program in Congressman Scott's district has established a leadership role in the state and has earned a national reputation.

Highlights of findings from the HFV FY 2000 Statewide Evaluation

Child Health: Preliminary findings suggest that the majority of program participants are receiving early prenatal care and most of the babies born were in the healthy birth weight range. Immunization coverage for this very high risk population exceeds the Virginia average. In fact, approximately half of the HFV sites have already surpassed the Healthy People 2010 goal of 90% - a national objective set to be reached by the end of the decade. The Hampton program in Congressman Scott's district also reported fewer pregnancy risks and birth complications .

Maternal Health: HFV also recently established state-wide goals in the area of mothers' health to reduce closely-spaced births and delay/reduce repeat teen pregnancies. 100% of the sites surpassed the state criterion and we know that such delays are associated with higher educational attainment and increased future job status.

Parenting and the Home Environment: This important domain provides a cornerstone for the effects of Healthy Families. Programs are helping parents to improve parent-child interactions, develop more adequate home environments, and provide more appropriate developmental stimulation for their children. We know, for example, that a lack of secure infant-caregiver attachment is linked with early aggression and predicts later aggression and violence. Programs that strengthen these family connections may be helping to instill important protective factors that reduce the risk of violence.

Child Abuse and Neglect: Eight sites have had sufficient longitudinal data to evaluate this objective. All of them surpassed the state objective (no more than 5% of founded cases). In fact, none of the annual rates of founded cases exceeded 1.5%. These results are especially encouraging given what we know about the characteristics of this overburdened sample (rates of child abuse and neglect were estimated by the Federal Interagency Forum on Child and Family Statistics to be 4.7%). The Oregon Healthy Start cost benefit analysis estimated the lifetime savings from fewer investigations and less foster care, treatment, juvenile services, special education, and residential placement to be approximately \$125, 000 per participant.

Summary

Irrefutable evidence from recent brain research and the early childhood intervention literature confirms that early education and what happens before kindergarten is crucial to a child's success in school and in life. HFV programs are trying to translate this research into policies and practices that will improve the lives of Virginia's children. During the last three years, 25% of Virginia's kindergartners and first graders have been assessed as not being ready to read or ready to learn – and many of these are the very same children who are not reading at grade level in the third grade or fail to be promoted – key predictors of school failure, delinquency, and violence. HFV and HFA programs, working with their community partners (libraries, Head Start, and preschools), are in a unique position to ensure that children are born healthy and enter school ready to learn and that they succeed as adolescents and adults who become earners, responsible parents, and contributing citizens, and not violent offenders.

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